FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D



SEC USE ONLY

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

	5 / 5 /	RECEIVED
		- //
	A. BASIC IDENTIFICATION DATA	
	n amendment and name has changed, and indicate change.)	198
	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
•		DOCECCED
Type of Business Organization  ☑ corporation ☐ business trust	☐ limited partnership, already formed ☐ other (please sp ☐ limited partnership, to be formed	FRUCEUSED
Actual or Estimated Date of Incorporal Jurisdiction of Incorporation or Organi	zation: (Enter two- letter U.S. Postal Service abbreviation	for State:
	CN for Canada; FN for other foreign jurisdictio	n)   <b>M   A  </b>

### **General Instructions**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on the ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Charles Longfield Business or Residence Address (Number and Street, City, State, Zip Code) 1030 Massachusetts Avenue, Cambridge, Massachusetts 02138 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Andrew Finke Business or Residence Address (Number and Street, City, State, Zip Code) 1030 Massachusetts Avenue, Cambridge, Massachusetts 02138 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) William H. Stansbury III Business or Residence Address (Number and Street, City, State, Zip Code) 1030 Massachusetts Avenue, Cambridge, Massachusetts 02138 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Lee Gartley Business or Residence Address (Number and Street, City, State, Zip Code) 1030 Massachusetts Avenue, Cambridge, Massachusetts 02138 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA

0 E 4 1 C 1 C 1	1.0 (1 0.11 1.1		·		
2. Enter the information request	_	;; ssuer has been organized wi	thin the next five weeks		
Each promoter of	of the issuer, if the i	ssuer has been organized wi	unn me past five years,		
Each beneficial	owner having the p	ower to vote or dispose, or d	lirect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer;
• Each executive	officer and director	of corporate issuers and of	corporate general and manag	ging partners of par	tnership issuers; and
<ul> <li>Each general an</li> </ul>	nd managing partner	of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)	<del></del>	<u> </u>		<del></del>
Business or Residence Address	(Number and Stree	et City State Zin Code)			
Dusiness of Residence Address	(Number and Street	ci, city, state, zip code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Street	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if in	dividual)				
Business or Residence Address	(Number and Stree	et. City. State. Zin Code)			
	(	o,, o.i.j, o.i.i., <u>o</u> .p oodo)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	idividual)				
<del></del>					
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	idividual)	<del></del>			
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)	<u> </u>		
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if in	ndividual)				<u> </u>
Business or Residence Address	(Number and Stre	et, City, State, Zip Code)			
	(Use b	plank sheet, or copy and use	additional copies of this shee	et, as necessary	

		A. BASIC IDE	NTIFICATION DATA		
2. Enter the information reques	ted for the following	:			
• Each promoter	of the issuer, if the i	ssuer has been organized wi	thin the past five years;		
2. Enter the information requested for the following:  Each promoter of the issuer, if the issuer has been organized within the past five years;  Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;  Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and  Each general and managing partner of partnership issuers.  Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director   General and/or Managing Partner  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director   General and/or Managing Partner  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Check Box(es) that Apply:   Promoter   Beneficial Owner   Executive Officer   Director   General and/or Managing Partner					
Each executive	officer and director	of corporate issuers and of	corporate general and manag	ging partners of par	tnership issuers; and
• Each general a	nd managing partner	of partnership issuers.			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	<b>—</b> • • • • • • • • • • • • • • • • • • •
Full Name (Last name first, if in	ndividual)				
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			
Each promoter of the issuer, if the issuer has been organized within the past five years;  Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and  Each general and managing partner of partnership issuers.  Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner  Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)					
Full Name (Last name first, if it	ndividual)				
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	
Full Name (Last name first, if i	ndividual)				
Business or Residence Address	(Number and Stree	et, City, State, Zip Code)			
	(Use b	lank sheet, or copy and use	additional copies of this shee	et, as necessary	

B. INFORMATION ABOUT OFFERING	- 5 T	
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No
2. What is the minimum investment that will be accepted from any individual?	\$ N/A	
3. Does the offering permit joint ownership of a single unit?	Yes ⊠	No .
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchases in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.  Full Name (Last name first, if individual)		
Deires Deither Aller Oberts (Co. Co. T. C. 1)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	☐ All Sta	ates
[IL]       [IN]       [IN]	[HI]	[ID]
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	☐ All St	ates
[IL]	[HI]	[ID] [] [MO] [] [PA] [] [PR] []
Business or Residence Address (Number and Street, City , State, Zip Code)		
Name of Associated Broker or Dealer		<del></del>
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	☐ All Sta	ıtes
[IL]	[HI]	[ID]
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)		<u> </u>
C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS		

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt,	\$	\$
	Equity	\$700,000	\$700,000
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests.	\$	\$
	Other (Specify)	\$	\$
	Total	\$700,000	\$700,000
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount of Purchases
	Accredited Investors	5	\$700,000
	Non-accredited Investors	0	\$0
	Total (for filing under Rule 504 only)		\$
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		D. II.
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs		\$0
	Legal Fees		\$20,000
	Accounting Fees		\$0
	Engineering Fees		\$0
	Sales Commissions (specify finders' fees separately)		\$0
	Type of Security  Debt  Equity. \$700,  Gommon		\$0
	Total		\$20.000

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS		
	b. Enter the difference between the aggregate offering price given in response to Part C — Que and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted proceeds to the issuer."  Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used of the purposes shown. If the amount for any purpose is not known, furnish an estimate and the box to the left of the estimate. The total of the payments listed must equal the adjusted proceeds to the issuer set forth in response to Part C — Question 4.b. above.  Salaries and fees.  Purchase of real estate.  Purchase, rental or leasing and installation of machinery and equipment.  Construction or leasing of plant buildings and facilities.  Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger).  Repayment of indebtedness.  Working capital.  Other (specify):  Column Totals.  Total Payments Listed (column totals added)  D. FEDERAL SIGNATURE  te issuer has duly caused this notice to be signed by the undersigned duly authorized person. If the grature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule formation furnished by the issu		\$680,000	
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b. above.			
		Payments to Officers, Directors, & Affiliates	Payments To Others	
	Salaries and fees		□ \$	
	Purchase of real estate		□ \$	
	Purchase, rental or leasing and installation of machinery and equipment		□ \$	
	Construction or leasing of plant buildings and facilities		□ \$	
			□ \$	
	Repayment of indebtedness		□ \$	
	Working capital		፟ \$680,000	
	b. Enter the difference between the aggregate offering price given in response to Part C — Ques and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted proceeds to the issuer."  Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be use each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and the box to the left of the estimate. The total of the payments listed must equal the adjusted proceeds to the issuer set forth in response to Part C — Question 4.b. above.  Salaries and fees.  Purchase of real estate.  Purchase, rental or leasing and installation of machinery and equipment.  Construction or leasing of plant buildings and facilities.  Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger).  Repayment of indebtedness.  Working capital  Other (specify):  D. FEDERAL SIGNATURE  issuer has duly caused this notice to be signed by the undersigned duly authorized person. If the atture constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule der (Print or Type)  get Software, Inc.  Title of Signer (Print or Type)		□ \$	
	<del></del>			
	□ \$		□ \$	
	Column Totals 🔲 \$		፟ \$680,000	
	Total Payments Listed (column totals added)	፟ \$680,000		
	D. FEDERAL SIGNATURE			
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice mature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission formation furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.			
Та	riget Software, Inc.	305		
	- O-Mi-	· 		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

#### APPENDIX 2 3 4 Disqualification Type of security and aggregate under State ULOE (if yes, attach Intend to sell explanation of to non-accredited offering price Type of investor and waiver granted) investors in State amount purchased in State offered in state (Part E-Item 1) (Part B-Item1) (Part C-Item 1) (Part C-Item 2) Number of Number of Common Stock Accredited Non-Accredited State Investors Investors Yes No Yes No Amount Amount ΑL ΑK ΑZ AR CACO CTDE DC FLGA ΗI ID IL IN ΙA KS KY LA ME MD Common Stock \$484,614 \$484,614 0 0 Х MA Χ 4 ΜI MNMS

## APPENDIX

1	Intend to non-ac investors (Part B-	to sell ceredited in State	3 Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
MT									
NE									
NV								_	
NH									
NJ									
NM									
NY		X	Common Stock \$215,386	1_	\$215,386	0	0		X
NC	=								
ND									
ОН									
OK									
OR							_		
PA									
RI					<u> </u>				
SC									
SD									
TN									
TX		ļ							
UT									
VT									
VA		ļ							
WA									
wv									
WI									

1	Type of security and aggregate to non-accredited investors in State (Part B-Item1)  Type of security and aggregate offering price Type of investor and amount purchased in State (Part C-Item 1)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No No	(Part C-Item 1)	Number of Accredited Investors	(Part	C-Item 2)  Number of Non- Accredited Investors	Amount	Yes	No
WY		1.0		111. CSC0.13	77110411	THV ESTOR'S	Annount		
PR									